



TRANSMITTAL FORM

Attorney Docket No.

P3P2000078US/2369NP

In re the application of OKUDA, et al.

UT20 Rec'd PCT/PTO 13 MAY 2003
Date: May 8, 2003

Serial No: 10/018,708

Group Art Unit: 3723

Filed: Dec. 13, 2001

Examiner: to be assigned

For: TABLE OF WAFER POLISHING APPARATUS, METHOD FOR POLISHING SEMICONDUCTOR WAFER, AND METHOD FOR MANUFACTURING SEMICONDUCTOR WAFER

ENCLOSURES (check all that apply)					
<input type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/>	Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	(X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input checked="" type="checkbox"/>	Other Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer	Request for Refund of Fees 1.26 with Exhibits A, B and C. RECEIVED SEP 08 2003 TECHNOLOGY CENTER R3700	
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from to .			
<input type="checkbox"/>	Executed Declaration by Inventor(s)				

CLAIMS					
FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	0	0	0	\$18.00	\$ 0.00
Independent Claims	0	0	0	\$84.00	\$ 0.00
Total Fees					\$ 0.00

METHOD OF PAYMENT	
<input type="checkbox"/>	Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.
<input type="checkbox"/>	Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. <u>02-2120</u> (Sawyer Law Group LLP).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Attorney Name	Joseph A. Sawyer, Jr., Reg. No. 30,801
Signature	
Date	May 8, 2003

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on this date: May 8, 2003	
Type or printed name	Grace Alicea
Signature	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on May 8, 2003.


Grace Alicea

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: May 8, 2003

OKUDA, et al.

Serial No. 10/018,708

Group Art Unit: 3723

Filed: July 9, 2002

Examiner: *to be assigned*

For: TABLE OF WAFER POLISHING APPARATUS, METHOD FOR POLISHING SEMICONDUCTOR WAFER, AND METHOD FOR MANUFACTURING SEMICONDUCTOR WAFER

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR REFUND UNDER 37 CFR § 1.26

Sir:

I. REFUND REQUEST

This national phase application was filed December 13, 2001, and included a number of multiple dependent claims. A filing fee in the amount of \$1,448.00 was submitted at the time of filing the application. A copy of the Transmittal Letter as filed is attached as Exhibit A. On March 18, 2002, the PTO issued a Notification of Missing Requirements requesting a declaration of the inventors and a \$130.00 late declaration surcharge. That notice also indicated that Applicants owed \$360.00 for 37 total claims over 20 and \$280.00 as a multiple dependent claims surcharge. A copy of that Notice is attached as Exhibit B. On April 5, 2002, Applicants filed a Response to Notification of Missing Requirements including an executed Declaration and a

check in the amount of \$130.00. A copy of Applicant's Response to Notification of Missing Requirements and the accompanying Transmittal Letter is attached as Exhibit C.

When filing their Response to Notification of Missing Requirements, Applicants inadvertently failed to submit additional money for the 37 excess claims and the multiple dependent claims surcharge. On May 24, 2002, the PTO debited Applicants' Attorney's Deposit Account No.02-2120 for \$360.00 and \$280.00. A review of the file indicates that the calculation for the originally submitted filing fee of \$1,448.00 included \$280.00 for a multiple dependent claims surcharge. Hence, Applicant has paid that fee twice.

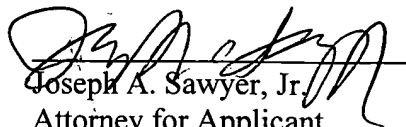
II. FEE PAID FOR WHICH REFUND REQUESTED

Applicants respectfully request review of the file and a refund of \$280.00 for their duplicate payment of the multiple dependent claims surcharge.

III MANNER OF REFUND

Please make refund by crediting Deposit Account No. 02-2120 (Sawyer Law Group LLP).

Respectfully submitted,


Joseph A. Sawyer, Jr.
Attorney for Applicant
Reg. No. 30,801
(650) 493-4540